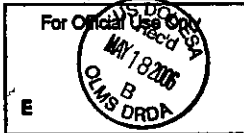


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U S C 439 or 440



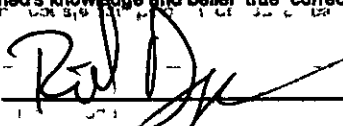
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 25621	2 Fiscal Year Covered From 1 / 1 / 2005 Through 12 / 31 / 2005
3 Name and address of person filing Name Richard G Doyle P O Box Bldg Room No if any Street 11401 N Congress Avenue City Kansas City State Missouri ZIP Code +4 64153	4 Name file number and address of labor organization Name USW Local 760 Labor Organization File Number 541-365 P O Box Building and Room Number if any Street 11401 N Congress Avenue City Kansas City State Missouri ZIP Code +4 64153
5 Position in labor organization President	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name Harely-Davidson Motor Company Trade Name if any P O Box Bldg Room No if any Street 3700 W Juneau Avenue City Milwaukee State Wisconsin ZIP Code +4 53208	7.a Nature of Interest, Transaction or Income See attached letter and Company's LM10 filing 7.b Amount

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)		
Signed 	On 5/13/2006 Date	816 270 8474 Telephone Number

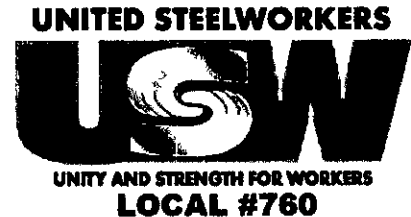
Name of Person Filing Richard Doyle	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	9 Business deals with <input type="checkbox"/> a Labor Organization <input type="checkbox"/> b Trust <input type="checkbox"/> c Employer				
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	<table border="1"> <tr> <td data-bbox="803 682 1526 945"> 11 a Nature of such dealing </td> </tr> <tr> <td data-bbox="803 945 1526 987"> 11 b Approximate dollar value of such dealing </td> </tr> <tr> <td data-bbox="803 987 1526 1249"> 12 a Nature of interest held or income received </td> </tr> <tr> <td data-bbox="803 1249 1526 1287"> 12 b Amount </td> </tr> </table>	11 a Nature of such dealing	11 b Approximate dollar value of such dealing	12 a Nature of interest held or income received	12 b Amount
11 a Nature of such dealing					
11 b Approximate dollar value of such dealing					
12 a Nature of interest held or income received					
12 b Amount					

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	14 a Nature of payment
13 b Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?	14 b Amount of payment

**United Steel, Paper and Forestry,
Rubber, Manufacturing, Energy,
Allied Industrial and Service
Workers International Union**



11401 North Congress
Kansas City, Mo 64153

TO WHOM IT MAY CONCERN

Re Harley-Davidson LM-10

After careful consideration of LM-30 reporting requirements and based on advice received from officials from the Steelworkers International Union and Attorneys of the Steelworkers International Union the following letter is to serve as an explanation for possible LM 10 and LM 30 discrepancies

Enclosed you will find the LM-10 Report filed by Harley-Davidson Motor Company for the year 2005. The costs on this LM-10 Report (identified in box 11a, b, and c, on page 14 of 17) are for use of office space and various types of common office equipment that is of general value to the Local Union as a whole and not a matter of interest, transaction, income, or other economic benefit to me. As the primary officer of the Local Union the LM-10 Report was issued to me.

The figures are paid in accordance to the Collective Bargaining Agreement (CBA) and the established past practices pursuant to that CBA.

The Union Industries Show (whose costs are identified in box 11a, b, and c, on page 15 of 17) is a joint promotion of company products to the general public as part of our labor-management relationship. The event is, generally, attended by Local Union officials, rank-and-file members as well as salaried members of management. Included in the LM-10 Report is the cost of ink, paper and other printing supplies that was used solely to provide printed photographs of the general public on a company made motorcycle. No items were provided to me, as an individual, above the de minimis exemption rule as established. Therefore, I feel none of these items are reportable under form LM-30.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard Doyle", written over a horizontal line.

Richard Doyle
USW Local 760
President

Part B

Name of Reporting Employer Harley-Davidson Motor Company	File Number
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Check Item Number (from Page 2) to which this Part B applies	ITEM 8 a <input checked="" type="checkbox"/>	ITEM 8 b <input type="checkbox"/>	ITEM 8 c <input type="checkbox"/>	ITEM 8 d <input type="checkbox"/>	ITEM 8 e <input type="checkbox"/>	ITEM 8 f <input type="checkbox"/>
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9 a <input type="checkbox"/> Agreement <input checked="" type="checkbox"/> Payment <input type="checkbox"/> Both		9 c. Position in labor organization or with employer (if an independent labor consultant so state) <u>President USW Local 760</u>
9 b Name and address of person with whom or through whom a separate agreement was made or to whom payments were made Name <u>Richard G Doyle</u> P O Box, Building and Room Number if any _____ Street <u>11401 N Congress</u> City <u>Kansas City</u> State <u>Missouri</u> ZIP Code + 4 <u>64153</u>		9 d Name and address of firm or labor organization with whom employed or affiliated Organization <u>United Steelworkers</u> P O Box, Building and Room Number if any _____ Street <u>11401 N Congress</u> City <u>Kansas City</u> State <u>Missouri</u> ZIP Code + 4 <u>64153</u>
10 a Date of the promise agreement, or arrangement pursuant to which payments or expenditures were agreed to or made <u>N/A</u>		10.b The promise agreement, or arrangement was <input type="checkbox"/> Oral <input type="checkbox"/> Written <input type="checkbox"/> Both ("Written agreements entered into during the fiscal year must be attached.")
11.a Date of each payment or expenditure (mm/dd/yyyy)	11 b Amount of each payment or expenditure	11 c. Kind of each payment or expenditure (Specify whether payment or loan and whether in cash or property)
<u>Ongoing for 2005</u> _____ _____ _____ _____	<u>3 756</u> _____ _____ _____ _____	<u>Cumulative annual expenditures</u> <u>We provide office space to the Union and we pay</u> <u>for regular business expenses</u> _____ _____ _____
12 Explain fully the circumstances of all payments, including the terms of any oral agreement or understanding pursuant to which they were made <u>These payments are a matter of past practice not any formal agreement. The expenses we cover include computer equipment and cell phones and fair market value of office space</u>		

Part B

Name of Reporting Employer Harley-Davidson Motor Company	File Number
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Check Item Number (from Page 2) to which this Part B applies	ITEM 8 a <input checked="" type="checkbox"/>	ITEM 8 b <input type="checkbox"/>	ITEM 8 c <input type="checkbox"/>	ITEM 8 d <input type="checkbox"/>	ITEM 8 e <input type="checkbox"/>	ITEM 8 f <input type="checkbox"/>
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9.a <input type="checkbox"/> Agreement <input checked="" type="checkbox"/> Payment <input type="checkbox"/> Both		9.c Position in labor organization or with employer (if an independent labor consultant, so state). <u>President USW Local 760</u>
9.b Name and address of person with whom or through whom a separate agreement was made or to whom payments were made Name <u>Richard</u> <u>G Doyle</u> P O Box, Building and Room Number if any _____ Street <u>11401 N Congress</u> City <u>Kansas City</u> State <u>Missouri</u> ZIP Code + 4 <u>64153</u>		9.d Name and address of firm or labor organization with whom employed or affiliated Organization <u>United Steelworkers</u> P O Box, Building and Room Number if any _____ Street <u>11401 N Congress</u> City <u>Kansas City</u> State <u>Missouri</u> ZIP Code + 4 <u>64153</u>
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<u>Ongoing for 2005</u> 	<u>3 756</u> 	<u>Cumulative annual expenditures</u> <u>We provide office space to the Union and we pay</u> <u>for regular business expenses</u>
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